

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000104658

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** LITTLE CARE BEARS LEARNING AND CHILD CARE CENTER, INC.

**Current Principal Place of Business:**

1715 W. CLEVELAND STREET  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 47113  
TAMPA, FL 33646

**New Mailing Address:**

**FEI Number:** 45-4104106

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MYERS, MATT C ESQ  
1715 W. CLEVELAND STREET  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCDONALD, CEDRICK  
Address: P.O. BOX 47113  
City-St-Zip: TAMPA, FL 33646

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CEDRIC MCDONALD

P

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date